# MULTIPLE DEPENDENT CLAIM
## FEE CALCULATION SHEET

SERIAL NO. 10 722 451

FILING DATE 11-28-03

APPLICANT(S)

CLAIMS

| | AS FILED | | AFTER 1ST AMENDMENT | | AFTER 2ND AMENDMENT | |
|---|---|---|---|---|---|---|
| | IND | DEP | IND | DEP | IND | DEP |
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| TOTAL DEP. | 44 | | | | | |
| TOTAL CLAIMS | 5? | | | | | |

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| TOTAL IND. | | | | | | | |
| TOTAL DEP. | | | | | | | |
| TOTAL CLAIMS | | | | | | | |